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AUTHOR Wasow, Eileen; Ruhf, Robin
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ABSTRACT

This guide is intended to accompany a staff development videotape which attempts to: (1) heighten awareness regarding attitudes, values and misconceptions about chemical dependency; (2) provide information about the impact of alcohol and other drugs on young special needs children; and (3) demonstrate skills and strategies for working with special needs children in the area of prevention education. The guide presents a synopsis of the tape contents and additional background information for each video segment. Part I of the tape focuses on awareness, skills, and practice. It examines why alcohol and drug prevention education is important for special needs children, dispels myths of what "drug-exposed" means, explains skills and curriculum for responding to children's concerns, and stresses the creation of classrooms as "safe spaces." In Part II, the roles of early intervention and family school collaboration in alcohol and other drug prevention education programs is examined. Each video segment is intended to be shown in a separate training session. Background information covers the history of Project Healthy Choices, guidelines for prevention education, the importance of a developmental perspective, the drug exposed child, and the family disease of chemical dependency. Specific staff development activities for each segment are also suggested. (DB)

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GUIDE TO THE
STAFF DEVELOPMENT VIDEO PROGRAM
FOR K-2 SPECIAL NEEDS EDUCATORS

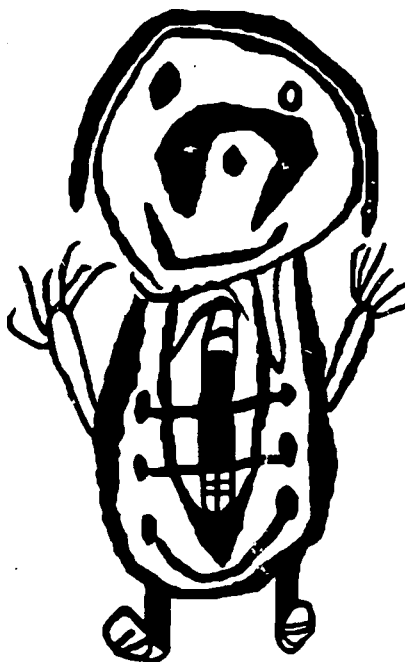
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SAFE SPACES:

*Drug and Alcohol Prevention
Education for Special Needs
and Drug Exposed K-2 Children*



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Under a grant from the
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Drug Free Schools and Communities Program

SAFE SPACES
DRUG AND ALCOHOL PREVENTION EDUCATION FOR
SPECIAL NEEDS AND DRUG EXPOSED K-2 CHILDREN

Staff Development Video Program and Printed Guide for K-2 Special Needs Educators

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A Program by
Eileen Wasow & Robin Ruhf
Project Healthy Choices • Bank Street College of Education
610 West 112th Street • New York, NY 10025 • Phone: 212/222-6700

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Seledia Shephard, Program Officer

Video and Guide Written by
Eileen Wasow and Robin Ruhf

Video Program Produced and Directed by
Harvey Bellin and Tom Kieffer • The Media Group, Inc. • Weston, CT

Bank Street College of Education
Dr. Joseph Shenker, President
Fern Khan, Dean of Continuing Education

Project Healthy Choices Staff
Eileen Wasow, Director • Robin Ruhf, Special Education Coordinator
Madelaine Centeno, Parent Education Coordinator • Mary Bassett & Nancy Klein, Staff Developers
Laurie Green, Staff Developer, Special Education • Afia Thomas, Administrative Assistant

Project Healthy Choices • New York City Special Education Advisory Board
Lorraine Boyhan, Principal, P. 140K, District #75
Virginia Connelly, Director, Drug & Alcohol Prevention Program, District #6,
Deirdre Danaher, Special Education Staff Developer, Community School District #6
Theadora de Soyza, Director, Miriam de Soyza Learning Center
Audrey Fuentes, Bilingual Special Education Coordinator, P.S. 76, District #30
Judith Gold, Director, Project Share, District #30
Dorothy Hively, District Administrator, Special Education, District #30
Stephen Kandall, M.D., Chief of Neonatology, Beth Israel Medical Center
Miriam Klein, Principal, P.S. 36, District #75
Joan McIntee, Director, Goddard Day Care Center
Kathleen LeFevre, Director, Drug & Alcohol Prevention Program, District #75
Kathleen Noonan, Staff Associate, Citizens Committee for Children
Rev. Marilyn Oliver, Family/Parent Advocate, Miriam de Soyza Learning Center
Elsbeth Pfeiffer, Director, Child Life Special Education, Bank Street College of Education
Bill Rath, Program Developer, American Red Cross, Greater New York
Joel D. Reiser, District Administrator, Special Education, District #6
Dr. Sylvia Ross, Chair, Special Education, Bank Street College of Education
Ellen Shelton, Asst. Director, Substance Abuse Prevention, NYC Board of Education
Lolita Wood, Director, Drug and Alcohol Prevention Programs, District #4
Claire Wurtzel, Special Education Faculty, Bank Street College of Education
Donna Zambrotta, Unit Coordinator, P. 140K, District #75

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Contents

Introduction.....	4	Synopsis of <i>Safe Spaces</i> Video, Part One: "Awareness, Skills, and Practice".....	7
The Video Program.....	4	Staff Development Activities for Part One.....	8
This Printed Guide	4	Synopsis of <i>Safe Spaces</i> Video, Part Two: "Early Intervention & Family-School Collaboration".....	10
In-Service Training Sessions	4	Staff Development Activities for Part Two.....	10
Background.....	5	Master Copy of Handout for Training Session Participants ...	11
History of Project Healthy Choices.....	5		
Guidelines for Prevention Education.....	5		
Importance of a Developmental Perspective	6		
The Drug Exposed Child.....	6		
The Family Disease of Chemical Dependency.....	6		



The cover art of the videocassette and this guide is derived from a puppet drawn by a New York City first grade special needs student.

INTRODUCTION

Safe Spaces is a staff development program developed by Project Healthy Choices of Bank Street College of Education. It is designed to combine the fundamental aims of prevention education with the concerns of adults living or working with special needs children.

It has three basic goals:

1. Heighten awareness regarding attitudes, values and misconceptions about chemical dependency.
2. Provide information about the impact of alcohol and other drugs on young special needs children
3. Demonstrate skills and strategies for working with special needs children in the area of prevention education.

The Video Program

The *Safe Spaces* staff development video training program is presented in two parts:

Part One: Awareness, Skills, and Practice (15 Minutes) Examines why alcohol and other drug prevention education is important for special needs children; dispelling myths of what drug-exposed means; skills and curriculum for responding to children's concerns; and creating classrooms with "safe spaces" environments.

Part Two: Early Intervention and Family-School Collaboration (11 Minutes) The vital roles of early intervention and family school collaboration in alcohol and other drug prevention education for young special needs children.

This Printed Guide

This guide contains a contents synopsis and background information for each video segment. It also includes suggested staff development activities for the two video segments. The activities can also be used independently and tailored to meet the needs of different groups. Page 11 of this guide can be photocopied as a hand out or used as an overhead in the training sessions for Part One of *Safe Spaces*.

In-Service Training Sessions

Ideally, each of the two segments should be shown in a training session of at least forty-five minutes.

The facilitator or staff developer should familiarize him or herself with each video segment and with the background information in this guide. The trainer should also be familiar with the activities and exercises, which are designed to help participants raise their own questions and increase their own understanding of the information presented.

It is expected that participants will draw on and share personal experiences. The facilitator should therefore be sensitive to building trust among the participants while fostering an interactive approach to the material.

When this staff development video program is screened in different sessions, it is easy to find the beginning of Part 2 on the videocassette. Run your video in the visible Fast Forward mode and watch for the full-screen title, **Part Two Follows**, which precedes Part Two.

BACKGROUND

History of Project Healthy Choices

Project Healthy Choices was developed in 1988 in response to the growing impact of substance abuse on young children in the New York City public schools.

In 1989, the Project also recognized the importance of addressing the need for prevention education with young children in special education classes.

Like all children, they too are exposed to alcohol and other drugs.

Children with special needs face a wide variety of physical, emotional or learning challenges, but they all face a common heightened risk for chemical dependency due to one or more of these factors:

- Prolonged use of medication
- Family history of chemical dependency
- Growing up in high risk environments
- Prenatal exposure to alcohol or other drugs

Project Healthy Choices was also concerned that young children entering kindergarten and first grade, who were labeled "crack babies" would be further stigmatized at school.

Since its inception, Project Healthy Choices has maintained that all young children need age-appropriate prevention education. Therefore, if we want all special needs children to maximize their potential, and to resist the use of harmful and illegal drugs, they too should receive age-appropriate alcohol and other drug prevention education.

Guidelines for Prevention Education

Central to prevention education is the premise that the use of alcohol, tobacco, and other drugs is wrong and harmful for all children. Prevention education, must be grounded in a program that helps children build self-esteem and positive social skills. It must also help them become critical thinkers and competent problem-solvers.

As research in the field of tobacco, alcohol and other drugs is constantly changing, children need accurate information about chemical dependency. Prevention education for young children in general or special education must be culturally sensitive and tailored to meet their physical, emotional and learning needs.

The key components of a prevention education program tailored for special needs children are:

- Self-assessment by educators
- Environment (physical, emotional, learning)
- An integrated approach to curriculum
- Early intervention
- Family-school collaboration.

BACKGROUND

(continued)

Importance of a Developmental Perspective

A developmental perspective helps us to keep an open mind about each child's potential. We can focus on a child's strengths, even as we grapple with the many challenges faced by that child and his or her family. Observing and listening to each child to discern his or her strengths is at the heart of Bank Street's approach to teaching and learning.

As caring adults, as professionals working with children with special needs, we too face challenges in the area of prevention education. We bring our own personal history and raise our own questions about alcohol and other drugs, the meaning of drug exposure, and the impact of substance abuse on young children.

The Drug Exposed Child

Part One introduces the Healthy Choices Safe Spaces seminar for special needs educators. It helps them begin to examine their own attitudes, concerns and misconceptions about chemical dependency.

Through exercises designed to heighten awareness and challenge the conventional understanding of the word "drug exposed", we can begin to look at the many factors which may put a child at risk for chemical dependency.

Drug exposure is a complex term. The child exposed in utero to alcohol or other drugs is just one example of a "drug exposed" child. The child who lives in a family where the disease of chemical dependency leads to violence or neglect is also a "drug exposed child".

The child least recognized as "drug exposed" may be the child who suffers psychological damage even though parental alcohol or other drug use may not be evident to those outside of the family.

The Family Disease of Chemical Dependency

Building on the foundation of the family disease concept of chemical dependency, *Safe Spaces* seeks to reverse the layers of stigma which society uses to label children with special needs:

- We seek to shift the focus from a deficit model for families and children to one of strengths and challenges.
- We incorporate alcohol and other drug prevention education in the special needs classroom as a means of helping all children to understand what chemical dependency means and to break the intergenerational cycle of chemical dependency.
- We shift from looking in isolation at children, prenatally exposed to alcohol and other drugs to acknowledging that we can be exposed in many ways: prenatally, in the family, through friends, school, community and through the media. This shift helps us see the extent to which chemical dependency is a disease which affects people of all races, ages and social strata.

These guidelines are designed to provide a framework for exploring this issue. If we are to work effectively with young special needs children, we must begin by looking at our own experiences, and at our own environments of drug exposure.

Synopsis of *Safe Spaces* Video Program, Part One: "Awareness, Skills, and Practice"

Part One of *Safe Spaces* deals with the need for educators to:

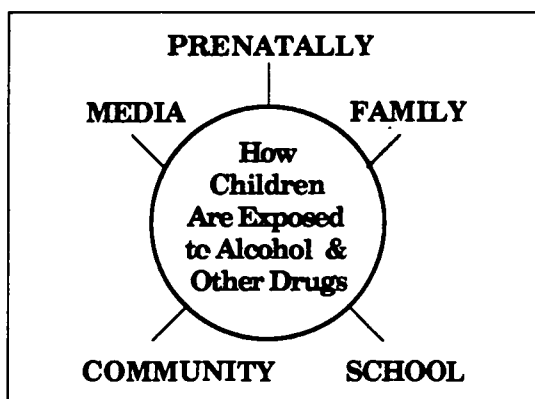
- Increase their awareness of what drug exposure means.
- Explore the importance of environment as a "co-teacher" in prevention education.
- Adopt an approach that tailors curriculum to children's needs and learning styles.

Exposure to alcohol and other drugs: What does it mean to you?

In the *Safe Spaces* program special needs educators begin with a process of self-assessment.

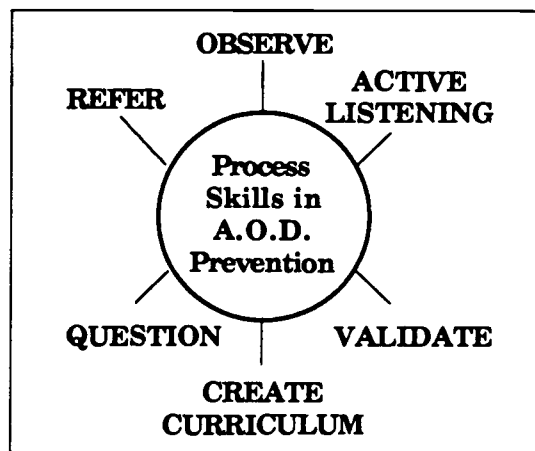
Using an exercise called *Graffiti*, participants write the variety of ways they have been exposed to alcohol and other drugs in their lives. They are then asked to compare their experiences with the ways young special needs children are also exposed to alcohol and other drugs.

A range of similar categories emerges for the educators and the children:



Environment and Process

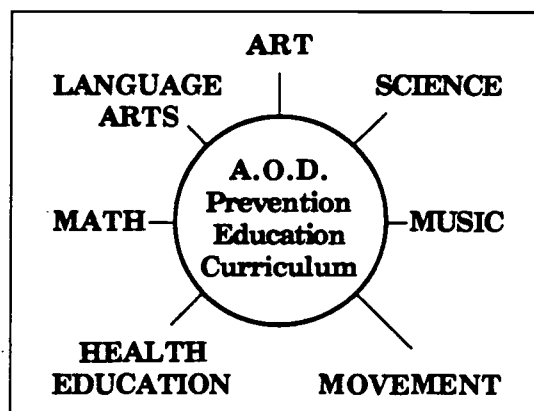
Teachers in the video are shown using a variety of process skills with the children in their classes: observing, active listening, validating, questioning, referring to support staff, and creating curriculum.



A *safe spaces* environment provides the context for engaging with children and using these skills.

Curriculum and Learning Styles

Young special needs children have diverse learning styles and strengths. Prevention education can be presented in an integrated curriculum through a variety of content areas:



Staff Development Activities for Part One: “Awareness, Skills, and Practice”

After viewing Part One, explore the following questions with your group.

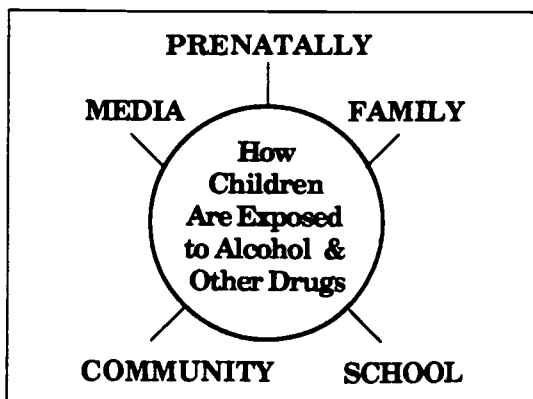
The hand out on page 11 can be photocopied for participants to use as a visual reference in the following activities.

The following four sets of activities require approximately two hours. If your training session cannot accommodate all four sets, please choose one of the four which you feel will be most beneficial to your group.

(1) Exposure to alcohol and other drugs: What does it mean to you?

Invite participants to perform the “Graffiti” exercise shown in Part One of the video program:

1. Ask participants to write on the blackboard the different ways they have been exposed to alcohol and other drugs in their lives.
2. Then ask participants to imagine the similar ways in which young children today are exposed to alcohol and other drugs.
3. As participants respond, the facilitator circles on the board each of the ways in which the participants and young children are similarly exposed to alcohol and other drugs.
4. The facilitator then summarizes and categorizes the range of ways children and adults are exposed. The chart below can help categorize the ways. The group can add additional categories.



(2) Environment: Creating Safe Spaces

Invite participants to design “safe spaces” classroom environments for K-2 special needs children.

1. Divide the participants into small groups, and distribute large pieces of chart paper or construction paper to each group.
2. Ask each group to group to draw a diagram of a classroom for young special needs children which includes “safe spaces” to foster the goals of prevention education:
 - Building self esteem
 - Problem-solving skills
 - Social skills
 - Building trust and resiliency
3. When the groups have completed their diagrams, ask each group to present their model to the other participants, and to describe how the areas of their models can be used to promote prevention education.

(Part One Activities
continue on the next page)

Staff Development Activities for Part One (continued)

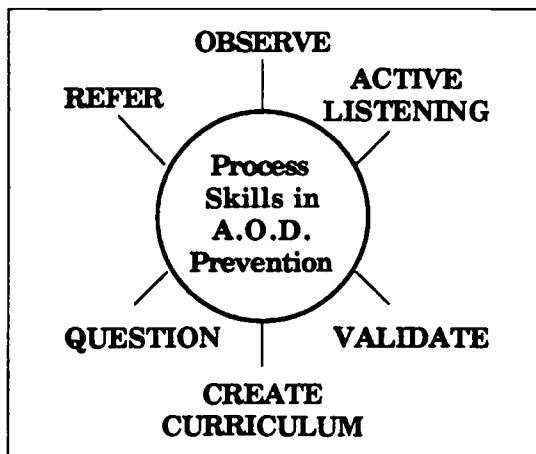
(3) Role Playing for Process Skills

1. Ask participants to share what they are seeing and hearing in daily interactions with children — questions, stories, or concerns about alcohol or other drugs.
2. Choose one example to create a role play which will help participants respond to children's questions, stories or concerns.
3. Ask one participant to role play the child. Ask four or five other participants to play adult roles such as teacher, counselor, assistant principal, or security guard.
4. After child tells the AOD incident or story, ask the adults to respond spontaneously as they might to any child with whom they work.

The facilitator can then ask:

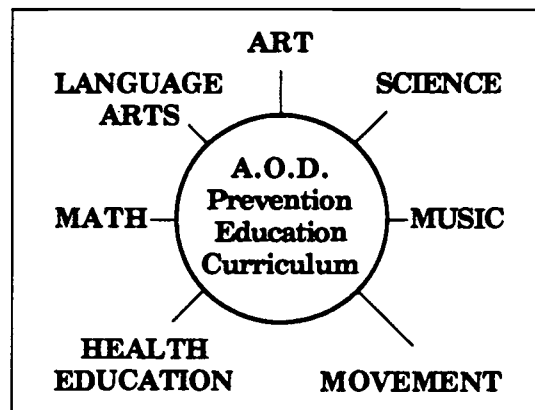
- To the child: *Which response worked best for you? Why?*
- To the entire group: *What skills did each adult role-player use?*
- To the adult role-players: *What did you feel as you responded?*

The facilitator can then summarize with the chart below of process skills educators can draw upon when issues of alcohol and other drugs arise in the classroom. The group can add additional skills.



(4) Curriculum and Learning Styles

In small groups, review the curriculum wheel below, and add content areas for your own class.



The facilitator can then ask the participants:

1. Which content areas of the classroom reflects your own strengths?
2. Think about the children in your class. Which content areas reflect their learning styles and strengths?
3. Building on the process skills listed above, think of an incident you have observed or heard about which could serve as a springboard for prevention education in your classroom.
4. Which process skills will you use to initiate this exploration and shared dialogue?
5. Which content area will you use to help the children extend their learning?
6. How can you reach out to children's families to help them engage in this process of "creating curriculum?"

11

Synopsis of *Safe Spaces* Video Program, Part Two: “Early Intervention & Family-School Collaboration”

Part Two of this staff development video program extends the definition of safe spaces, physically and emotionally. It explores the role of pre-school early intervention and family-school collaboration.

It shows how creating safe spaces for young special needs children and drug and alcohol exposed children is fundamental to effective prevention education. It demonstrates how involving families from the beginning and incorporating parenting skills and practices can make a difference to children's healthy development and their ability to make healthy choices as they grow.

To focus on the importance of early intervention and family-school collaboration, Part Two presents a model special needs early childhood center, the Miriam de Soyza Learning Center in the South Bronx, New York.

Center staff share their thinking about building relationships with their families, how they set up their rooms and how they interact with children.

Staff Development Activities for Part Two: “Early Intervention & Family-School Collaboration”

After viewing Part Two, explore the following questions with your group:

1. How does the de Soyza Center extend the definition of safe spaces to all aspects of the child's early schooling experience?
2. In what ways does the de Soyza Center program promote the following components of prevention education:
 - Building self esteem, self-awareness
 - Problem-solving
 - Social skills
 - Increasing health and resiliency through early intervention
 - Enhancing family-school collaboration
3. Research suggests that building strong family-school partnerships can contribute to a child's success in school. It is also a cornerstone of prevention education.

List the different ways families collaborate in their children's education in your school. How might you enhance prevention education through increased family-school collaboration?



SAFE SPACES:

Drug and Alcohol Prevention Education for Special Needs and Drug Exposed K-2 Children

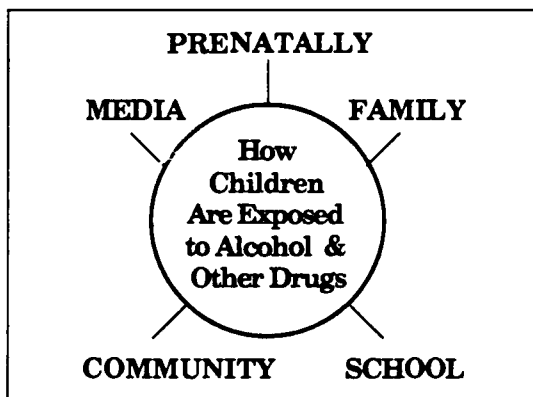
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HANDOUT FOR TRAINING SESSION PARTICIPANTS

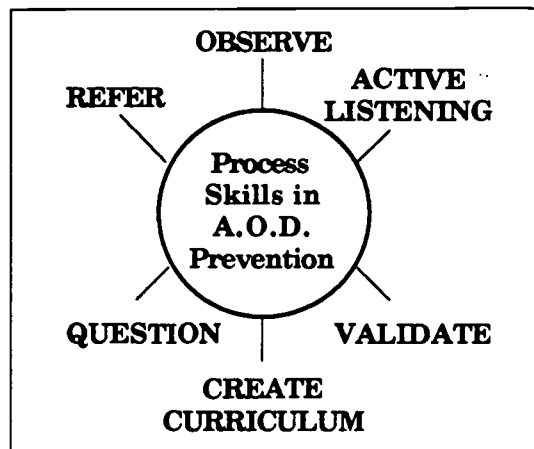
Part One of *Safe Spaces* deals with the need for educators to:

- Increase their awareness of what drug exposure means.
- Explore the importance of environment as a "co-teacher" in prevention education.
- Adopt an approach that tailors curriculum to children's needs and learning styles.

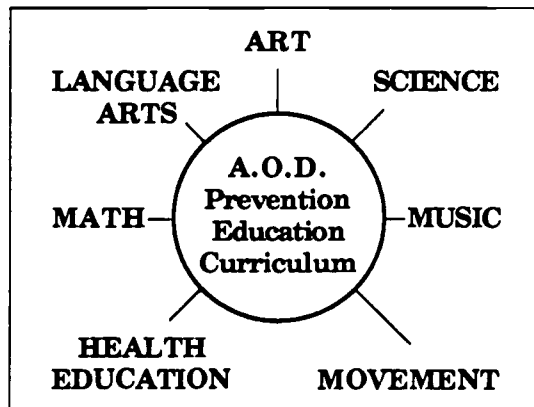
(1) Exposure to alcohol and other drugs: What does it mean to you?



(2) Environment and Process



(3) Curriculum and Learning Styles



SUGGESTED RESOURCES

Information on Alcohol & Other Drugs:

The National Clearinghouse for Alcohol and Drug Information
P.O. Box 2345 • Rockville, MD 20852
Call Toll free: 1-800-729-6686

Information on Bank Street College's Prevention Curricula for K-2 Students:

Project Healthy Choices
Bank Street College of Education
610 West 112th Street
New York, NY 10025
Phone: 212/222-6700

Recommended Articles and Reports:

Chasnoff, Ira J., M.D., Griffith, Dan, Freier, Catherine, and Murray, James, "Cocaine/Polydrug Use: Two Year Follow-Up", *Pediatrics*, 89:2, February, 1992

Kandall, Stephen R., M.D., "Don't Call Them Crack Babies", *New York Newsday*, April 18, 1991

"Beyond the Stereotypes: Women, Addiction, and Perinatal Substance Abuse", U.S. House of Representatives Select Committee on Children, Youth and Families, April 19, 1990 (U.S. Govt. Printing Office, 1990)

Poulson, Marie, "The Impact of Substance Abuse on Child Care: Challenges for Today, Hopes for Tomorrow", Keynote address, National Child Care Association Conference, Washington, DC, 1990

**Guide to the Staff Development Video
Program for K-2 Special Needs Educators**



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